PTO/S8/06 (08-03)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application of Docket Number O O O O O O O O			
CLAIMS AS FILED - PART ((Cotumn 1) (Cotumn 2) SMALL ENTITY								OR	OTHER THAN SMALL ENTITY		
	FOR	NUM	NUMBER FILED		BER EXTRA	RATE	FEE	7	CATE		1
BASIC FEE (37 CFR 1.16(a))						1	3		RATE	FEE	4
TOTAL CLAIMS (37 CFR 1.18(c))			minus 20			1	 `	- OR		<u></u>	4
INDEPENDENT CLAIMS		IMS				\	·	OR	X \$=		
	37 CFR 1.18(b)) minus 3 * *-				× • •		OR	x s=		7	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						. + \$		OR	+5 .		1
* If the difference in column 1 is less than zero, enter *O* in column 2.						TOTAL		OR	TOTAL		1
	С	LAIMS AS AN	MENDED	- PART II			<u> </u>	,	IOIAL	L	1
		(Column 1)		(Column 2)	(Column 3)	CAAAI	CICTO 4	OR	OTHE	R THAN	
_	971	CLAIMS		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	3MALI	ENTITY	1	SMALL	ENTITY	4
AMENDMENT	18/06	REMAINING AFTER AMENDMENT				RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
Š	(37 CFR 1,16(e))	24	Minus	22	12	x s=		OR	x 5 50=	/n人	1
Ę	(37 CFR 1.15(b))	2	Minus	3	10	x s_ =		OR	X 5_ =	100	1
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+5 =		1			1
						TOTAL		OR	+s=	1010	4
	- / /	(Calumn 1)				ADO'L FEE		OR	ADD1 FEE	100	1
<u>_</u>	4/	CLAIMS	T T	(Column 2) HIGHEST	(Column 3)				r	(y
AMENDMENT	4/07	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	(37 CFR 1,16(c))	24	Minus	. 99	= ()	XS =	FEE			FEE	
	Independent (37 CFR 1.18(b))	. 2	Minus	- 2	-0			OR	X \$		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL			7 (2 41) (2 2 4)		x s=		OR	X 5=		
_			EUEFGNUEN	TOLAIN (37C)	-R 1.16(d))	+s =		OR	+ 5		
						ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1) .		(Column 2)	(Cotumn 3)						
ပ	ŀ	CLAIMS REMAINING		HIGHEST				1			
AMENDMENT	-	AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE .	' ADDI- TIONAL	
	Total (37 CFR 1.16(e))		Minus	•	2	X 8 =				FEE	
	Independent (37 CFR 1.18(b))	•	Minus	•••	=		 	·OR	X \$=		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s =	 	OR OR	x s=		
						TOTAL		UK [+ s =		
•	If the entry in col	umn 1 is less that	the entry in	column 2 write	To in column 2	ADD'L FEE	L	OR	ADD'L FEE		
		umber Previously									

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.